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<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
<b>TOI/Sub-TOI:</b>	LTC03I Individual Long Term Care/LTC03I.001 Qualified		
<b>Product Name:</b>	Long Term Care - MC34263_1112		
<b>Project Name/Number:</b>	Long Term Care/MC34263_1112		

## Filing at a Glance

Company:	Mutual of Omaha Insurance Company
Product Name:	Long Term Care - MC34263_1112
State:	Arkansas
TOI:	LTC03I Individual Long Term Care
Sub-TOI:	LTC03I.001 Qualified
Filing Type:	Advertisement
Date Submitted:	01/23/2013
SERFF Tr Num:	MUTM-128861132
SERFF Status:	Closed-Approved
State Tr Num:	
State Status:	Approved-Closed
Co Tr Num:	KRISTIN MILLER

Implementation	
Date Requested:	
Author(s):	Melanie Worth, Kristin Miller
Reviewer(s):	Donna Lambert (primary)
Disposition Date:	01/28/2013
Disposition Status:	Approved
Implementation Date:	

State Filing Description:

**State:** Arkansas **Filing Company:** Mutual of Omaha Insurance Company  
**TOI/Sub-TOI:** LTC03I Individual Long Term Care/LTC03I.001 Qualified  
**Product Name:** Long Term Care - MC34263\_1112  
**Project Name/Number:** Long Term Care/MC34263\_1112

## General Information

Project Name: Long Term Care  
Project Number: MC34263\_1112  
Requested Filing Mode:  
Explanation for Combination/Other:  
Submission Type: New Submission  
Overall Rate Impact:

Status of Filing in Domicile:  
Date Approved in Domicile:  
Domicile Status Comments:  
Market Type: Individual  
Individual Market Type:  
Filing Status Changed: 01/28/2013  
State Status Changed: 01/28/2013  
Created By: Kristin Miller  
Corresponding Filing Tracking Number:

Deemer Date:  
Submitted By: Kristin Miller

Filing Description:  
NAIC #: 261-71412  
FEIN #: 47-0246511  
Mutual of Omaha Insurance Company  
Long-Term Care Advertising  
MC34263\_1112

Enclosed for review by your Department is a copy of the above-captioned advertising. The form is new and is not intended to replace any previously approved form. It will be used with appropriate approved forms in your state.

Thank you for the review of this filing.

Sincerely,

For Questions, please contact Melanie Worth  
Phone: 402-351-4260; Fax: 402-351-5298  
E-mail: [advfilings@mutualofomaha.com](mailto:advfilings@mutualofomaha.com)

km

## Company and Contact

### Filing Contact Information

Kristin Miller, Product & Advertising Compliance Specialist	<a href="mailto:kristin.miller@mutualofomaha.com">kristin.miller@mutualofomaha.com</a>
Mutual of Omaha	402-351-3046 [Phone]
Mutual of Omaha Plaza	402-351-5298 [FAX]
Omaha, NE 68175	

**State:** Arkansas **Filing Company:** Mutual of Omaha Insurance Company  
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**Filing Company Information**

Mutual of Omaha Insurance Company	CoCode: 71412	State of Domicile: Nebraska
Mutual of Omaha Plaza	Group Code: 261	Company Type: Health Insurance
Omaha, NE 68175	Group Name:	State ID Number:
(402) 351-6910 ext. [Phone]	FEIN Number: 47-0246511	

**Filing Fees**

Fee Required? Yes  
Fee Amount: \$50.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

Company	Amount	Date Processed	Transaction #
Mutual of Omaha Insurance Company	\$50.00	01/23/2013	66777555

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## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved	Donna Lambert	01/28/2013	01/28/2013

<b>SERFF Tracking #:</b>	MUTM-128861132	<b>State Tracking #:</b>		<b>Company Tracking #:</b>	KRISTIN MILLER
<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company		
<b>TOI/Sub-TOI:</b>	LTC03I Individual Long Term Care/LTC03I.001 Qualified				
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## Disposition

Disposition Date: 01/28/2013

Implementation Date:

Status: Approved

Comment:

Rate data does NOT apply to filing.

Schedule	Schedule Item	Schedule Item Status	Public Access
Form	Flyer	Approved	Yes

<b>State:</b>	Arkansas	<b>Filing Company:</b>	Mutual of Omaha Insurance Company
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## Form Schedule

Lead Form Number: MC34263_1112								
Item No.	Schedule Item Status	Form Name	Form Number	Form Type	Form Action	Action Specific Data	Readability Score	Attachments
1	Approved 01/28/2013	Flyer	MC34263_1112	ADV	Initial			MC34263_1112.pdf

### Form Type Legend:

<b>ADV</b>	Advertising	<b>AEF</b>	Application/Enrollment Form
<b>CER</b>	Certificate	<b>CERA</b>	Certificate Amendment, Insert Page, Endorsement or Rider
<b>DDP</b>	Data/Declaration Pages	<b>FND</b>	Funding Agreement (Annuity, Individual and Group)
<b>MTX</b>	Matrix	<b>NOC</b>	Notice of Coverage
<b>OTH</b>	Other	<b>OUT</b>	Outline of Coverage
<b>PJK</b>	Policy Jacket	<b>POL</b>	Policy/Contract/Fraternal Certificate
<b>POLA</b>	Policy/Contract/Fraternal Certificate: Amendment, Insert Page, Endorsement or Rider	<b>SCH</b>	Schedule Pages



# Long-Term Care Insurance

**A Bright Idea.**

# Choices for the Future

Even though your association members continue to enjoy good health as they age, at some point, they may need a little help. Maybe they'll need help with simple things like shopping or preparing a meal. Perhaps they'll need the services of a visiting nurse. They may even need nursing home care. An individual Long-Term Care insurance policy from Mutual of Omaha Insurance Company (Mutual of Omaha) may help protect your association members' needs and give them choices:

- The choice to help remain independent and receive the quality care they need in their homes
- The choice to not rely on family and friends to care for them
- The choice to help keep a lifetime of savings intact for the things they really want to do

Whether their needs are short-term or long-term, we have the right policy for your association members. So, they'll have choices about their future.

## Mutual of Omaha's Long-Term Care Insurance

When you team up with Mutual of Omaha Insurance Company, your members are eligible to apply for individual Long-Term Care insurance at a lower premium – 5% lower than our individual policy rate available to the general public.

## Other Benefits Available to Your Association's Members:

- The convenience of having premiums deducted from their bank account; no need to worry about a missing payment
- The services of a professional insurance agent\*
- Taking their coverage with them when they move or retire

Your Mutual of Omaha insurance agent\* is able to help association members determine the coverage that best fits their needs. We may be able to help them live their dreams.



Policy forms: LTC09M-AG or state equivalent. In FL: LTC09M-AG-FL. In ID: LTC09M-AG-ID. In NC: LTC09M-AG-NC. In OK: LTC09M-AG-OK. In OR: LTC09M-AG-OR. In PA: LTC09M-AG-PA. In WA: LTC09M-AG-WA. These policies have exceptions and limitations. For costs and complete details of coverage, call or write your insurance agent\* or the company.

**This is a solicitation of insurance. By responding you are requesting a licensed insurance agent\* to contact you by telephone to receive more information.**

\*WA residents: All instances of the term "agent" should be replaced with "producer."

Underwritten by:

**MUTUAL OF OMAHA INSURANCE COMPANY**

Mutual of Omaha Plaza

Omaha, NE 68175

[mutualofomaha.com](http://mutualofomaha.com)